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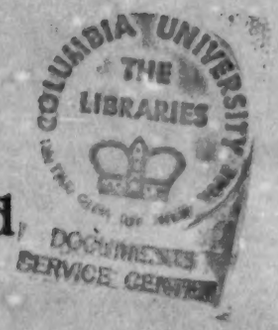
Health Care Financing Notes

Medicare: Participating Providers and Suppliers of Health Services, 1980



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Health Care Financing Notes

The Health Care Financing Administration was established to combine health financing and quality assurance programs into a single agency. HCFA is responsible for the Medicare program, Federal participation in the Medicaid program, the Professional Standards Review Organization program, and a variety of other health care quality assurance programs.

The mission of the Health Care Financing Administration is to promote the timely delivery of appropriate, quality health care to its beneficiaries—approximately 47 million of the nation's aged, disabled, and poor. The Agency must also ensure that program beneficiaries are aware of the services for which they are eligible, that those services are accessible and of high quality, and that Agency policies and actions promote efficiency and quality within the total health care delivery system.

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The purpose of the ***Health Care Financing Notes*** is to provide the public with descriptive program data or information as soon as it becomes available. Data are presented here in a brief, concise format. Frequently a more comprehensive analysis of the data may be available at a later time in one of the Health Care Financing Administration's other publications.

Medicare: Participating Providers and Suppliers of Health Services, 1980

By Raymond Goldsteen

This *Note* presents 1980 data on the number of providers and suppliers of services certified to participate in the Medicare program.[1] Figures are shown separately for hospitals, skilled nursing facilities, home health agencies, independent laboratories, outpatient physical therapy and portable x-ray services.

The accompanying general tables show: (1) the trends in the number of providers and suppliers of services participating in the Medicare program between July 1975 and July 1980 (Table 1); (2) the number and geographic distribution of participating hospitals (Table 2); and, (3) the number and geographic distribution of participating skilled nursing facilities, home health agencies, and other suppliers of services (Table 3).

The text tables show: (1) the distribution of short-stay hospitals (Table A) and skilled nursing facilities (Table B) by number of beds and type of control, July 1980; (2) the distribution and rates per 1,000 HI beneficiaries of short-stay hospital and skilled nursing facility beds by U.S. Census division, July 1980 (Table C); and (3) the distribution of providers terminated under Medicare, by type of control, type of provider, and reason of termination, July 1979-July 1980 (Table D).

Trends in Participation, July 1975-July 1980

- Between July 1975 and July 1980, the number of participating short-stay hospitals decreased by three, from 6,107 to 6,104. However, the number of certified beds increased by 88,864, to 990,621, raising the average number of beds in participating short-stay hospitals from 148 to 162 (Table 1).
- Although the number of certified psychiatric hospitals increased from 385 in 1975 to 408 in 1980 (6 percent), the number of beds dropped by more than one-third, from 198,802 to 131,276. The average number of beds per psychiatric hospital decreased from 516 to 322. This decrease probably reflects the shift in the place of treatment of psychiatric illness from large State hospitals to smaller community based facilities.
- The number of certified other long-stay hospitals increased from 238 in 1975 to 265 in 1980.[2]
- The number of participating skilled nursing facilities (SNFs) and beds increased substantially between July 1975 and July 1980. The number of SNFs increased from 3,932 to 5,052 (28 percent) while the number of beds increased from 287,479 to 436,007 (52 percent). As a result, the average number of beds per SNF increased from 73 to 86. The implementation of uniform standards for certification of SNFs under the Medicare and Medicaid programs, as mandated by the 1972 amendments to the Social Security Act, contributed to some of the increase in the number of Medicare certified facilities. Facilities previously certified only under the Medicaid program became certified under Medicare, with the application of the uniform standards. Additional factors accounting for the increase in the number of SNFs, especially for the sharp increase from 4,002 facilities in 1977 to 4,749 facilities in 1978, are: 1) certain States mandated that facilities must participate in the Medicare as well as the Medicaid program and, 2) The Medicare-Medicaid Anti-Fraud and Abuse Amendments (P.L. 95-142) passed in 1977 provided 90 percent Federal funding to States for anti-fraud and abuse programs. Among the activities instituted in response to these amendments was the assurance of compliance with conditions of participation by Medicaid certified Intermediate Care Facilities (ICF). Activities and investments made to assure compliance may have provided incentives to upgrade facilities further to participate in the Medicare program as SNFs.
- The number of home health agencies (HHAs) increased gradually from 2,242 in 1975 to 2,924 in 1980 (30 percent). The passage in 1975 of the Health Revenue Sharing and Health Services Act (P.L. 94-63), which appropriated $3 million for grants to "demonstrate the development and expansion of home health services," probably contributed to this increase.
- The number of independent clinical laboratories increased from 3,048 in 1975 to 3,447 in 1980 (13 percent).

Distribution of Short-Stay Hospitals and Skilled Nursing Facilities by Number of Beds and Type of Control, July 1980

- Of the 6,104 short-stay hospitals participating in 1980, 56 percent (3,388) were voluntary nonprofit institutions.

This report is one of a series prepared in the Office of Research, Judith Lave, Director, to provide a description and analysis of the use and cost of the health care benefits furnished to the beneficiaries of the Medicare and Medicaid programs administered by the Health Care Financing Administration. This report was written under the administrative supervision of Allen Dobson, Director, Division of Beneficiary Studies. It was prepared in the Program Statistics Branch, Herbert A. Silverman, Chief. Statistical and software services were provided by Charles Helbing, Vikki Latta, Cheryl Black and Betty Gunn.

[1] For the statutory definition of providers and suppliers of services and the detailed conditions for participating under Medicare, see *Medicare Program Regulations*, 42 CFR, Part 405, Subpart S, Health Care Financing Administration.

[2] Starting with this report, certified tuberculosis hospitals are now included with other long-stay hospitals. As of July 1980, only 14 tuberculosis hospitals remained in the program. This was primarily due to a reduction in the incidence and prevalence of the disease and the use of other methods of treatment. For the purpose of this report other long-stay hospitals include general long-stay hospitals, chronic disease, Christian Science, and special long-stay hospitals.

Almost one-third of the hospitals (1,937) were government operated (mostly by State and local governments) and the remaining 13 percent (779) were proprietary (Table A).

- The average number of beds of all short-stay hospitals was 162. Voluntary hospitals had the largest mean number of beds (201), nearly twice that of government hospitals (112) and proprietary hospitals (120).
- More than 50 percent (3,081) of all short-stay hospitals had fewer than 100 beds; most of these are located in rural areas.
- Only 317 short-stay hospitals (5 percent of all certified short-stay hospitals) had 500 or more beds; only two of these were privately owned.
- In contrast to short-stay hospitals, more than two-thirds (3,406) of the participating SNFs were privately owned. An additional 22 percent (1,110) were operated by voluntary nonprofit organizations, and the remaining 536 were government facilities (Table B).
- The mean number of beds of participating SNFs was 86. The mean number of beds by type of control ranged from 81 for voluntary nonprofit SNFs to 98 for government facilities.
- Nearly one-third (1,607) of all SNFs had fewer than 50 beds, while only about 6 percent (286) had 200 or more beds.

Distribution of Short-Stay Hospital and Skilled Nursing Facility Beds, July 1980

- Among the nine census divisions, there were wide variations in the ratio of short-stay hospital beds and SNF beds per 1,000 Medicare HI enrollees (Table C).
  - The number of short-stay hospital beds per 1,000 HI enrollees (aged and disabled) ranged from a low of 31.4 in New England to a high of 40.7 in the West South Central States.
  - The number of SNF beds per 1,000 HI enrollees ranged from a low of 1.6 in the West South Central States (only 10 percent of the national rate) to a high of 30.8 in the Pacific States.
  - The West South Central division had, by far, the highest ratio of short-stay hospital beds to SNF beds (25.4 to 1). In contrast, in the Pacific division, the ratio of short-stay hospital beds to SNF beds is nearly one.

Distribution of Other Suppliers of Health Services Under Medicare, July 1980

- Substantial differences occurred by State in the distribution of home health agencies (HHAs), independent laboratories (ILs), outpatient physical therapy (PT) or speech pathology (SP) and suppliers of portable x-ray services (Table 3).
  - Among the 50 States, 10 had more than 100 HHAs certified under Medicare. Conversely, 5 States and the District of Columbia had fewer than 10 agencies approved by Medicare.
  - Of the 3,447 independent laboratories certified by Medicare, almost a quarter (851) of them were located in California; Texas and New York followed with 204 and 203, respectively.
  - Of the 419 providers of service certified for reimbursement for outpatient physical therapy or speech pathology, or both, 44 were located in Florida and 32 in Michigan; 23 States had 3 or fewer.
  - About one-third (73) of the 216 suppliers of portable x-ray services certified for reimbursement under Medicare were located in California.

Providers Terminated Under Medicare, July 1979-July 1980

- A total of 508 providers (about 3 percent of the 18,845 participating providers shown in the report) terminated their participation under the Medicare program between July 1979 and July 1980. Only 40 (8 percent) of these terminations were involuntary (Table D). In 1973, approximately 4.9 percent of the providers terminated their participation under the Medicare program.[3]
- Of the 508 terminations, 219 (43 percent) were independent laboratories; only 9 of these were involuntary terminations.
- The next largest group of terminations consisted of 110 skilled nursing facilities; 20 of these were involuntary terminations. The involuntary terminations of SNFs represented half of all involuntary terminations.
- Seventy-seven hospitals were terminated during this period, with only six being involuntarily terminated.
- Of the 508 terminations, more than one-half (283) were voluntary nonprofit institutions; about one-fourth (134) were under proprietary control; and the remaining 91 were government operated.

Sources of Data

HCFA obtained data published in this report from applications to participate in the Medicare program submitted by providers and suppliers of services, and from certification forms completed by State agencies and regional offices. The data reported reflect information from these forms recorded in the master records maintained by the Health Care Financing Administration.

Definitions

Hospital—An institution engaged in providing to inpatients, by or under the supervision of physicians, diagnostic and therapeutic services for medical treatment of injured, disabled, or sick persons.

Short-stay Hospital—Those hospitals where the average patient stay is less than 30 days.

Long-stay Hospital—Those hospitals where the average patient stay is 30 days or more.

Psychiatric Hospital—An institution primarily engaged in providing to inpatients, by or under the supervision of a physician, psychiatric services for the diagnosis and treatment of mental illness.

Tuberculosis Hospital—An institution primarily engaged in providing to inpatients, by or under the supervision of a physician, medical services for the diagnosis and treatment of tuberculosis.

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[3] For more information, see Jacquelyn J. Watts, "Medicare: Participating Health Facilities, July 1973," Health Insurance *Note* No. 55, Office of Research and Statistics, Social Security Administration, Feb. 17, 1974. This is the latest established report providing termination data.

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Skilled Nursing Facility—An institution primarily engaged in providing to inpatients skilled nursing care and related services for patients who require medical or rehabilitation services.

Beds—The number of certified Medicare beds regularly available (those set up and staffed for use).

Home Health Agency—An agency primarily engaged in providing intermittent skilled nursing and other therapeutic services to patients in their own place of residence.

Independent Laboratory—A laboratory performing diagnostic tests independent of a physician's office or a hospital that participates in the Medicare program.

Outpatient Physical Therapy or Speech Pathology—Such services furnished by a provider of services, a clinic, a rehabilitation agency, or a public health agency to a beneficiary as an outpatient.

Portable X-ray—An individual, partnership or organization which takes radiographs with portable equipment, usually in the patient's place of residence, under the general supervision of a physician.

Provider Termination—Hospitals and other participating providers may withdraw voluntarily from participation in the Medicare program for any reason, provided adequate notice is given to the Secretary of Health and Human Services and to the public. A facility may also lose its certification as a participating provider or supplier if it is found to be in noncompliance with provisions of the law, conditions of participation, or other regulations. Some facilities, after having their participation terminated involuntarily, may correct their deficiencies and be readmitted to the program.

TABLE A

Number and Percentage Distribution of Short-Stay Hospitals by Number of Beds and Type of Control, All Areas, July 1980

Number of Beds	All Short-Stay Hospitals		Voluntary		Proprietary		Government	
	Number	Percentage Distribution	Number	Percentage Distribution	Number	Percentage Distribution	Number	Percentage Distribution
Total	6,104	100.0	3,388	100.0	779	100.0	1,937	100.0
Fewer than 100	3,081	50.5	1,284	37.9	405	52.0	1,392	71.9
100-199	1,314	21.5	803	23.7	233	29.9	278	14.3
200-299	721	11.8	522	15.4	103	13.2	96	5.0
300-399	410	6.7	326	9.6	24	3.1	60	3.1
400-499	261	4.3	206	6.1	12	1.5	43	2.2
500 or More	317	5.2	247	7.3	2	0.3	68	3.5
Mean Number of Beds	162		201		120		112	

TABLE B

Number and Percentage Distribution of Skilled Nursing Facilities by Number of Beds and Type of Control, All Areas, July 1980

Number of Beds	All Skilled Nursing Facilities		Voluntary		Proprietary		Government	
	Number	Percentage Distribution	Number	Percentage Distribution	Number	Percentage Distribution	Number	Percentage Distribution
Total	5,052	100.0	1,110	100.0	3,406	100.0	536	100.0
Fewer than 25	499	9.9	148	13.3	263	7.7	88	16.4
25-49	1,108	21.9	317	28.6	655	19.2	136	25.4
50-99	1,871	37.0	355	32.0	1,361	40.0	155	28.9
100-149	938	18.6	149	13.4	729	21.4	60	11.2
150-199	350	6.9	60	5.4	251	7.4	39	7.3
200 or More	286	5.7	81	7.3	147	4.3	58	10.8
Mean Number of Beds	86		81		86		98	

TABLE C

Ratio of Short-Stay Hospital (SSH) and Skilled Nursing Facilities (SNF) Beds to Medicare HI Population, July 1980[1]

Census Division	SSH Beds per 1,000 HI Enrollees		SNF Beds per 1,000 HI Enrollees		Ratio of SSH to SNF Beds per 1,000 HI Enrollees
	Number	Ratio[2]	Number	Ratio[3]	
United States	36.1	1.00	16.0	1.00	2.3
New England	31.4	.87	17.7	1.11	1.8
Mid-Atlantic	32.3	.89	24.0	1.50	1.3
East North Central	39.2	1.09	14.5	.91	2.7
West North Central	39.9	1.11	6.9	.43	5.7
South Atlantic	35.1	.97	12.5	.78	2.8
East South Central	39.6	1.09	10.9	.68	3.6
West South Central	40.7	1.13	1.6	.10	25.4
Mountain	35.8	.99	14.5	.91	2.5
Pacific	32.1	.89	30.8	1.93	1.0

[1] Based on HI enrollment as of January 1, 1980.
[2] Ratio of SSH beds per 1,000 HI enrollees in census division to the rate for the entire United States.
[3] Ratio of SNF beds per 1,000 HI enrollees in census division to the rate for the entire United States.

TABLE D

Distribution of Providers and Suppliers Terminated Under Medicare by Type of Control and Type of Termination, July 1979-July 1980

Type of Control and Type of Provider	Total	Reason for Termination		
		Voluntary Closure	Voluntary Withdrawal	Involuntary Withdrawal
Total	508	245	223	40
Hospitals	77	51	20	6
Skilled Nursing Facilities	110	12	78	20
Home Health Agencies	72	30	40	2
Independent Laboratories	219	143	67	9
Outpatient PT and/or SP	14	1	13	0
Portable X-ray	16	8	5	3
Voluntary	283	60	106	17
Hospitals	26	15	8	3
Skilled Nursing Facilities	19	2	15	2
Home Health Agencies	22	7	14	1
Independent Laboratories	201	131	61	9
Outpatient PT and/or SP	6	1	5	0
Portable X-ray	9	4	3	2
Proprietary	134	39	74	21
Hospitals	23	17	4	2
Skilled Nursing Facilities	80	7	55	18
Home Health Agencies	22	11	11	0
Independent Laboratories	1	0	1	0
Outpatient PT and/or SP	1	0	1	0
Portable X-ray	7	4	2	1
Government	91	46	43	2
Hospitals	28	19	8	1
Skilled Nursing Facilities	11	3	8	0
Home Health Agencies	28	12	15	1
Independent Laboratories	17	12	5	0
Outpatient PT and/or SP	7	0	7	0
Portable X-ray	0	0	0	0

TABLE 1

Number and Type of Facilities and Beds Participating in the Medicare Health Insurance Program and Percentage Change, All Areas, July 1975–July 1980

Type of Facility	Facilities						Percent Change 1975-80
	1975	1976	1977	1978	1979	1980	
Hospitals	6,773	6,802	6,806	6,797	6,801	6,777	.1
Short-Stay	6,107	6,112	6,131	6,130	6,128	6,104	-.1
Psychiatric	385	401	400	400	411	408	6.0
Other Long-Stay	238	251	239	241	244	265[1]	11.3
Skilled Nursing Facilities	3,932	3,928	4,002	4,749	4,963	5,052	28.5
Home Health Agencies	2,242	2,361	2,420	2,605	2,788	2,924	30.4
Independent Laboratories	3,048	3,194	3,221	3,281	3,373	3,447	13.1
	Beds						
Hospitals	1,140,395	1,149,122	1,162,990	1,142,248	1,147,498	1,149,997	.8
Short-Stay	901,757	922,601	953,067	965,323	985,070	990,621	9.9
Psychiatric	198,802	188,288	172,949	145,376	133,106	131,276	-34.0
Other Long-Stay	33,013	32,479	29,390	27,827	27,069	28,100[1]	-15.0
Skilled Nursing Facilities	287,479	309,790	349,650	418,246	419,835	436,007	51.7

[1] Starting with this report, certified tuberculosis hospitals are now included with other long-stay hospitals. As of July 1980 only 14 tuberculosis hospitals remained in the Medicare program.

TABLE 2

Number of Participating Medicare Hospitals and Beds, by Type of Hospital, Region, Division, and State, July 1980

Geographic Area	Total		Short-Stay		Psychiatric		Other Long-Stay	
	Hospitals	Beds	Hospitals	Beds	Hospitals	Beds	Hospitals	Beds
All Areas	6,777	1,149,997	6,104	990,621	408	131,276	265	28,100
United States	6,720	1,141,304	6,049	982,431	407	130,931	264	27,942
Northeast	1,098	289,235	918	211,682	107	65,264	73	12,289
North Central	1,997	315,842	1,772	284,023	112	24,403	113	7,416
South	2,385	373,218	2,212	336,601	123	31,812	50	4,805
West	1,240	163,009	1,147	150,125	65	9,452	28	3,432
New England	339	66,617	275	50,777	29	7,911	35	7,929
Connecticut	52	15,696	36	11,058	8	3,564	8	1,074
Maine	54	5,074	52	4,556	2	518	—	—
Massachusetts	166	34,775	129	26,665	12	2,376	25	5,734
New Hampshire	31	4,025	28	3,153	3	872	—	—
Rhode Island	18	4,712	14	3,427	2	164	2	1,121
Vermont	18	2,335	16	1,918	2	417	—	—
Middle Atlantic	759	222,618	643	160,905	78	57,353	38	4,360
New Jersey	128	36,956	103	29,665	11	5,810	14	1,481
New York	355	119,100	303	78,519	38	38,435	14	2,146
Pennsylvania	276	66,562	237	52,721	29	13,108	10	733
East North Central	1,038	208,316	934	190,809	80	14,838	24	2,669
Illinois	271	59,594	247	56,439	19	2,528	5	627
Indiana	140	26,695	126	24,327	12	2,335	2	33
Michigan	234	45,086	213	39,068	14	4,943	7	1,075
Ohio	228	53,905	203	49,752	19	3,487	6	666
Wisconsin	165	23,036	145	21,223	16	1,545	4	268
West North Central	959	107,526	838	93,214	32	9,565	89	4,747
Iowa	154	17,855	131	15,638	4	1,351	19	866
Kansas	186	15,394	147	12,826	8	1,354	31	1,214
Minnesota	193	23,446	180	20,925	7	2,344	6	177
Missouri	177	31,594	160	27,701	8	3,032	9	861
Nebraska	130	10,477	104	8,291	4	696	22	1,490
North Dakota	56	4,870	54	3,994	1	788	1	88
South Dakota	63	3,890	62	3,839	—	—	1	51
South Atlantic	951	186,686	849	160,051	73	23,271	29	3,364
Delaware	11	2,763	7	1,973	2	638	2	152
Dist. of Columbia	15	8,660	12	4,644	2	3,646	1	370
Florida	243	51,304	221	48,096	20	3,040	2	168
Georgia	180	25,446	167	24,120	10	1,212	3	114
Maryland	73	20,726	57	15,066	8	4,630	8	1,030
North Carolina	158	28,371	139	23,110	12	4,737	7	524
South Carolina	81	15,865	75	11,780	5	3,959	1	126
Virginia	122	23,328	105	21,109	12	1,339	5	880
West Virginia	68	10,223	66	10,153	2	70	—	—
East South Central	534	74,348	508	71,363	17	2,446	9	539
Alabama	137	19,901	133	19,497	3	254	1	150
Kentucky	113	16,441	104	14,806	5	1,369	4	266
Mississippi	118	12,161	117	12,101	—	—	1	60
Tennessee	166	25,845	154	24,959	9	823	3	63

(Continued)

TABLE 2 (Cont'd.)

Number of Participating Medicare Hospitals and Beds, by Type of Hospital, Region, Division, and State, July 1980

Geographic Area	Total		Short-Stay		Psychiatric		Other Long-Stay	
	Hospitals	Beds	Hospitals	Beds	Hospitals	Beds	Hospitals	Beds
West South Central	900	112,184	855	105,187	33	6,095	12	902
Arkansas	100	11,502	97	10,980	2	522	1	—
Louisiana	145	21,263	136	18,882	6	2,207	3	174
Oklahoma	138	15,393	132	13,833	6	1,560	—	—
Texas	517	64,026	490	61,492	19	1,806	8	728
Mountain	425	44,060	399	40,124	14	3,310	12	626
Arizona	73	10,638	67	9,690	4	854	2	94
Colorado	94	13,037	84	11,089	5	1,536	5	412
Idaho	47	2,710	47	2,710	—	—	—	—
Montana	67	3,622	66	3,592	—	—	1	30
Nevada	25	3,148	23	3,006	2	142	—	—
New Mexico	48	4,449	45	4,319	1	92	2	38
Utah	42	4,400	39	4,027	1	321	2	52
Wyoming	29	2,056	28	1,691	1	365	—	—
Pacific	815	118,949	748	110,001	51	6,142	16	2,806
Alaska	25	1,457	24	1,257	1	200	—	—
California	570	91,211	518	85,760	40	2,781	12	2,670
Hawaii	25	2,556	20	2,242	1	178	4	136
Oregon	82	10,282	78	8,782	4	1,500	—	—
Washington	113	13,443	108	11,960	5	1,483	—	—
Other Outlying Areas	57	8,693	55	8,190	1	345	1	158
Puerto Rico	55	8,377	53	7,874	1	345	1	158
Virgin Islands	2	316	2	316	—	—	—	—
Other	—	—	—	—	—	—	—	—

TABLE 3

Number of Participating Medicare Skilled Nursing Facilities and Beds, Home Health Agencies, Outpatient Physical Therapy and/or Speech Pathology, Independent Laboratories, and Portable X-ray Services, by Region, Division, and State, July 1980

Region and State	Skilled Nursing Facilities		Home Health Agencies	Outpatient Physical Therapy/ Speech Pathology	Independent Laboratories	Portable X-Ray
	Number	Beds				
All areas	5,052	436,007	2,924	419	3,447	216
United States	5,047	435,801	2,895	416	3,407	216
Northeast	1,367	146,294	592	75	690	49
North Central	1,217	86,742	794	121	721	47
South	1,071	80,769	1,149	160	822	36
West	1,392	121,996	360	62	1,174	84
New England	412	28,625	311	19	229	21
Connecticut	177	18,032	83	11	74	10
Maine	16	404	18	1	2	—
Massachusetts	120	6,766	137	3	115	8
New Hampshire	24	803	40	2	5	1
Rhode Island	57	1,955	13	1	31	2
Vermont	18	665	20	1	2	—
Middle Atlantic	955	117,669	281	56	461	28
New Jersey	121	14,728	45	20	99	5
New York	523	67,906	120	14	203	16
Pennsylvania	311	35,035	116	22	159	7
East North Central	953	70,541	438	93	521	38
Illinois	215	8,229	132	28	187	9
Indiana	116	6,314	43	9	41	1
Michigan	280	21,440	65	32	150	7
Ohio	262	25,556	109	21	120	12
Wisconsin	80	9,002	89	3	23	9
West North Central	264	16,201	356	28	200	9
Iowa	24	715	107	7	16	1
Kansas	24	1,514	63	4	28	—
Minnesota	82	4,132	83	6	24	5
Missouri	51	3,942	48	8	102	3
Nebraska	19	1,370	17	1	10	—
North Dakota	57	4,017	12	2	13	—
South Dakota	7	511	26	—	7	—
South Atlantic	678	57,024	420	92	352	21
Delaware	14	957	6	2	12	1
Dist. of Columbia	5	378	4	—	9	—
Florida	194	21,116	131	44	133	10
Georgia	69	6,253	66	15	49	1
Maryland	85	8,774	30	5	70	4
North Carolina	136	8,020	85	3	20	2
South Carolina	89	6,845	21	15	15	1
Virginia	51	1,872	47	7	24	2
West Virginia	35	2,809	30	1	20	—

(Continued)

TABLE 3 (Cont'd.)

Number of Participating Medicare Skilled Nursing Facilities and Beds, Home Health Agencies, Outpatient Physical Therapy and/or Speech Pathology, Independent Laboratories, and Portable X-ray Services, by Region, Division, and State, July 1980

Region and State	Skilled Nursing Facilities		Home Health Agencies	Outpatient Physical Therapy/ Speech Pathology	Independent Laboratories	Portable X-Ray
	Number	Beds				
East South Central	336	19,647	427	26	139	3
Alabama	179	11,989	89	7	41	—
Kentucky	94	4,260	54	7	39	1
Mississippi	12	601	135	3	23	—
Tennessee	51	2,797	149	9	36	2
West South Central	57	4,098	302	42	331	12
Arkansas	2	128	90	3	25	—
Louisiana	11	1,460	71	10	49	3
Oklahoma	7	351	64	6	53	—
Texas	37	2,159	77	23	204	9
Mountain	255	16,229	138	37	172	11
Arizona	24	832	13	3	45	3
Colorado	70	5,676	43	17	48	3
Idaho	43	3,107	15	2	13	1
Montana	67	2,955	15	8	7	—
Nevada	23	1,796	8	1	20	1
New Mexico	4	223	19	5	17	2
Utah	23	1,470	9	—	17	1
Wyoming	1	170	16	1	5	—
Pacific	1,137	105,767	222	25	1,002	73
Alaska	4	207	1	1	4	1
California	969	90,583	147	14	851	61
Hawaii	26	1,709	9	1	31	—
Oregon	49	3,084	31	3	39	3
Washington	89	10,184	34	6	77	8
Other Outlying Areas	5	206	29	1	40	—
Puerto Rico	4	190	27	1	37	—
Virgin Islands	—	—	1	—	1	—
Other	1	16	1	—	2	—

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